

<i>SERFF Tracking Number:</i>	<i>THRV-126316036</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Thrivent Financial for Lutherans</i>	<i>State Tracking Number:</i>	<i>44056</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>L06I Individual Life - Variable</i>	<i>Sub-TOI:</i>	<i>L06I.002 Single Life - Flexible Premium</i>
<i>Product Name:</i>	<i>Replacement Face Pg VUL</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: Thrivent Financial for Lutherans

Product Name: Replacement Face Pg VUL

TOI: L06I Individual Life - Variable

Sub-TOI: L06I.002 Single Life - Flexible Premium

Filing Type: Form

SERFF Tr Num: THRV-126316036 State: Arkansas

SERFF Status: Closed-Approved-Closed
Closed

Co Tr Num:

State Status: Approved-Closed

Author: Karen Guyette

Date Submitted: 11/09/2009

Reviewer(s): Linda Bird

Disposition Date: 11/17/2009

Disposition Status: Approved-Closed
Closed

Implementation Date Requested: On Approval

State Filing Description:

Implementation Date:

General Information

Project Name:

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 11/17/2009

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 11/17/2009

Created By: Karen Guyette

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Karen Guyette

Filing Description:

In order to comply with Arkansas Rule 97 Life Insurance And Annuities Replacement, we are submitting for your review and approval the following form.

Replacement Face Page, Form V-VM-VULR (10)

This replacement face page will be used with Flexible Premium Variable Adjustable Life Insurance Contract, form V-VM-VUL (07), which was approved by your department on 1/09/2008 (State Tracking No. 37737).

This replacement face page will be used in place of the existing contract face page when the application for insurance

SERFF Tracking Number: *THRV-126316036* State: *Arkansas*
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Project Name/Number: */*

indicates that a replacement is involved. The replacement face page contains the 30-day notice of right to return the contract and the required refund.

Company and Contact

Filing Contact Information

Karen Guyette, Compliance Specialist II karen.guyette@Thrivent.com
625 Fourth Ave. South 800-847-4836 [Phone] 37251 [Ext]
Minneapolis, MN 55415 612-340-5040 [FAX]

Filing Company Information

Thrivent Financial for Lutherans	CoCode: 56014	State of Domicile: Wisconsin
4321 North Ballard Road	Group Code: 2938	Company Type: Fraternal
Appleton, WI 54919-0001	Group Name:	State ID Number:
(800) 847-4836 ext. [Phone]	FEIN Number: 39-0123480	

Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No
Fee Explanation: 1 form X \$20 = \$20
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Thrivent Financial for Lutherans	\$20.00	11/09/2009	31899299

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/17/2009	11/17/2009

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Disposition

Disposition Date: 11/17/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	THRV-126316036	State:	Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Replacement Face Page		Yes

SERFF Tracking Number: *THR**V*-126316036 State: *Arkansas*

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TOI: *L06I Individual Life - Variable* Sub-TOI: *L06I.002 Single Life - Flexible Premium*

Product Name: *Replacement Face Pg VUL*

Project Name/Number: */*

Form Schedule

Lead Form Number: V-VM-VULR (10)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	V-VM-VULR (10)	Other	Replacement Face Page	Initial			Replacement Face Page V-VM-VULR (10).pdf

This certificate of membership and flexible premium variable adjustable life insurance is a legal contract between you and Thrivent Financial for Lutherans. We issue this contract based on the Application signed by the applicant and the payment of the initial premium. Upon receiving due proof of the Insured's death, we will pay the Death Proceeds (see Section 6.1) to the beneficiary according to the provisions of this contract.

The amount or duration of the Death Benefit may vary with the Accumulated Value. The Accumulated Value may increase or decrease daily based on the investment experience of the Variable Account.

If this contract is in force with no Debt and no unpaid Monthly Deductions, the Death Proceeds will be at least equal to the Face Amount. If you meet the requirements for a No-Lapse Guarantee, this contract will remain in force at least until the Termination Date shown for that No-Lapse Guarantee on page 4.

Right to Cancel. Please read this contract carefully. You may cancel the contract for any reason before midnight of the 30th day after you first receive it. Do this by (1) mailing or delivering notice of cancellation to our Service Center or to the representative through whom you bought it, and (2) returning the contract. Notice given by mail and return of the contract by mail are effective on being postmarked, properly addressed and postage prepaid. If you cancel the contract, it will be deemed void from the beginning. Within seven days after we receive notice of cancellation and the returned contract, we will refund the sum of (1) the Accumulated Value on the day the returned contract is received by us or our representative, (2) the Percent of Premium Charges deducted and (3) any Monthly Deductions made.

Flexible Premium Variable Adjustable Life Insurance.
Life insurance payable at death. Death Benefit, Accumulated Value and contract duration, when based on Variable Account, will vary with investment experience and are not guaranteed.
Annual dividends payable if earned.
Settlement options to provide income.
[Accidental Death Benefit rider excludes war risks.]

Service Center:
Thrivent Financial for Lutherans
[4321 North Ballard Road]
[Appleton, WI 54919-0001]
Telephone [(800) 847-4836]
www.thrivent.com

Signed for the Society

President []

Secretary []

INSURED: [JOHN DOE]

AGE: [35] SEX: [MALE]

CONTRACT NUMBER: [V1234567]

DATE OF ISSUE: [JANUARY 1, 2010]

INITIAL FACE AMOUNT: [\$100,000]

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachment: AR VUL Ctf of Compliance.pdf		
Bypassed - Item: Application Bypass Reason: N/A - no policy being filed at this time. Comments:		
Bypassed - Item: Life & Annuity - Acturial Memo Bypass Reason: N/A - no policy being filed at this time. Comments:		
Satisfied - Item: Statement of Variability Comments: Attachment: AR VUL Statement of Variability.pdf		

**CERTIFICATION
OF
COMPLIANCE**

FORM NUMBER

V-VM-VULR (10)

FORM TITLE

Replacement Face Page

I certify that the above form submission meets the provisions of Rule and Regulation 19 as well as all applicable requirements of the Arkansas Insurance Department.

Signature of Officer

David J. Christianson

Name (Typed or Printed)

Director, Contract Forms and Compliance

Title

November 5, 2009

Date

STATEMENT OF VARIABILITY

Replacement Face Page, Form V-VM-VULR (10)

The following items have been bracketed to indicate that the information may be different in different replacement face pages or may be subject to change.

- The following wording will appear in the brief description on the face page only when the Accidental Death Benefit rider is elected: Accidental Death Benefit rider excludes war risks.
- Service Center address and telephone number may be changed.
- Officers' signatures will change if new officers are elected.
- Insured information is specific to each Insured: Insured, Age, Sex, Contract Number, Date of Issue, Initial Face Amount (\$25,000 minimum – no maximum).